COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

Attorney Docket PN01023AA

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

A SIGNAL PRO	CESSOR USED FOR S	YMBOL RECOVER	RY AND METHODS THEREIN		
the specification of which i	s attached hereto unless	s the following box is	is checked:		
was filed on International Application	on Number	as United State	es Application Number or PCT nended on		
I hereby state that I have including the claims, as an	e reviewed and undersinended by any amendme	tand the contents of ent referred to above	of the above-identified specification,		
I acknowledge the duty to accordance with Title 37, (disclose information wi Code of Federal Regulat	nich is material to tions, §1.56.	the examination of this application in		
application(s) for patent o	r inventor's certificate li	sted below and ha	es Code, §119(a)-(d) of any foreign ave also identified below any foreign fore that of the application on which		
Prior Foreign Application Number(s)	Country	Foreign Filing Da (MM/DD/YYYY			
hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below.					
	Application Number(s)	Filing Date (I	MM/DD/YYYY)		
listed below and, insofar a the prior United States app Code, § 112, I acknowledg	s the subject matter of e lication in the manner p e the duty to disclose in: Regulations, § 1.56 which I or PCT international filition or PCT Pare	each of the claims of the first formation which is read to be came available to the came	of any United States application(s) of this application is not disclosed in paragraph of Title 35, United States material to patentability as defined in a between the filing date of the prior ication. Parent Patent Number (if applicable)		

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Customer Number 23447

Direct all correspondence to: Customer Number 23447

Direct telephone calls to: (817) 245-4604

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

FULL NAME OF SOLE OR FIRST INVENTOR	INVENTOR'S SIGNATURE		
Weizhong Chen	INVENTORIS SIGNATURE		DATE
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